



MORRIS, MANNING & MARTIN, LLP
ATTORNEYS AT LAW

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TO: U.S. Patent & Trademark Office	
NAME: Examiner Jeffrey C. Pwu	TIME: 09/29/03
CONFIRMATION:	PAGES TO FOLLOW: 42
FAX NUMBER: 703/872-9327	

FROM: Morris, Manning & Martin, LLP	CHARGE TO:
NAME: John R. Harris	CLIENT/MATTER: 4526-29734
PHONE: (404) 233-7000	CONFIRMATION TIME:
	HR : MIN : SEC

COMMENTS:
RE:

**RECEIVED
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Applicant: German et al.
Docket No.: 4526-29734

Serial No.: 09/476,386
Filing Date: 12/30/1999

SEP 30 2003

Title: A Computer-Implemented Method For Providing A Consumer-To-Consumer Payment Service (As Amended)

Enclosures: One (1) Transmittal Form; One (1) Fee Transmittal for FY 2003; One (1) Patent Application Fee Determination Record; One (1) Credit Card Payment Form; One (1) Petition for Extension of Time Under 37 CFR 1.136(a); One (1) Executed Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address; One Executed Statement Under 37 CFR 3.73(b); One (1) Request for Continued Examination (RCE) Transmittal; and One 34-page Amendment and Response to Second Office Action and Record of Interview.

IF YOU HAVE ANY DIFFICULTY WITH THIS TRANSMISSION, PLEASE CALL (404) 233-7000

PTO/SB/06 (08-03)

Approved for use through 7/31/2008, OMB 0851-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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PATENT APPLICATION FEE DETERMINATION RECORD						Application or Document Number 4526-29734					
CLAIMS AS FILED - PART I											
(Column 1)		(Column 2)		SMALL ENTITY		OR		OTHER THAN SMALL ENTITY			
FOR	NUMBER FILED	NUMBER EXTRA		RATE	FEE			RATE	FEE		
BASIC FEE (37 CFR 1.18(a))					\$ _____				\$ _____		
TOTAL CLAIMS (37 CFR 1.18(c))				31	minus 20 =	11					
INDEPENDENT CLAIMS (37 CFR 1.18(b))				3	minus 3 =	0					
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(d))											
* If the difference in column 1 is less than zero, enter "0" in column 2.											
CLAIMS AS AMENDED - PART II											
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY		OR		OTHER THAN SMALL ENTITY	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDITIONAL FEE			RATE	ADDITIONAL FEE
Total (37 CFR 1.18(c))	31	Minus	31	= 0		X \$ _____ =				X \$ _____ =	
Independent (37 CFR 1.18(b))	3	Minus	3	= 0		X \$ _____ =				X \$ _____ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(e))											
TOTAL ADD'L FEE											
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY		OR		OTHER THAN SMALL ENTITY	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDITIONAL FEE			RATE	ADDITIONAL FEE
Total (37 CFR 1.18(c))	106	Minus	31	= 75		X \$ _____ =				X \$ <u>18</u> =	1350
Independent (37 CFR 1.18(b))	6	Minus	3	= 3		X \$ _____ =				X \$ <u>84</u> =	252
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(e))											
TOTAL ADD'L FEE											
(Column 1)		(Column 2)		(Column 3)		SMALL ENTITY		OR		OTHER THAN SMALL ENTITY	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	Minus	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDITIONAL FEE			RATE	ADDITIONAL FEE
Total (37 CFR 1.18(c))		Minus		=		X \$ _____ =				X \$ _____ =	
Independent (37 CFR 1.18(b))		Minus		=		X \$ _____ =				X \$ _____ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.18(e))											
TOTAL ADD'L FEE											

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.18. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO-2038 (02-2000)

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Credit Card Information			
Credit Card Type:	<input checked="" type="checkbox"/> Visa	<input type="checkbox"/> MasterCard	<input type="checkbox"/> American Express <input type="checkbox"/> Discover
Credit Card Account #:	4476190000575619		
Credit Card Expiration Date:	03/2004		
Name as it Appears on Credit Card:	Morris, Manning & Martin		
Payment Amount \$(US Dollars):	\$2462		
Signature:	<i>John R. Harris</i>		Date: September 29, 2003
<p>Refund Policy: The Office may refund a fee paid by mistake or in excess of that required. A change of purpose after the payment of a fee will not entitle a party to a refund of such fee. The Office will not refund amounts of twenty-five dollars or less unless a refund is specifically requested, and will not notify the payor of such amounts (37 CFR 1.26). Refund of a fee paid by credit card will be via credit to the credit card account.</p> <p>Service Charge: There is a 50.00 service charge for processing each payment refused (including a check returned "unpaid") or charged back by a financial institution (37 CFR 1.21(m)).</p>			
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Street Address 2:	1600 Atlanta Financial Center		
City:	Atlanta		
State: GA	Zip/Postal Code: 30326-1044		
Country:	USA		
Daytime Phone #: 404/233.7000	Fax #: 404/365.9532		
Request and Payment Information			
Description of Request and Payment Information:			
Payment for additional claims, 1-month and Request for Examination (RCE)			
Patent Fee	Patent Maintenance Fee	Trademark Fee	Other Fee
Application No. 09/476,386	Application No.	Serial No.	IDON Customer No.
Patent No.	Patent No.	Registration No.	
Attorney Docket No. 4526-29734		Identify or Describe Mark	

If the cardholder includes a credit card number on any form or document other than the Credit Card Payment Form, the United States Patent & Trademark Office will not be liable in the event that the credit card number becomes public knowledge.

PTO/SB/21 (08-03)

Approved for use through 07/31/2008. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/476,386	
	Filing Date	December 30, 1999	
	First Named Inventor	German et al.	
	Art Unit	3628	
	Examiner Name	Jeffrey C. Pwu	
Total Number of Pages in This Submission	42	Attorney Docket Number	4526-29734

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Group...
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input checked="" type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks: 1 transmittal form; 1 fee transmittal for FY 2003; 1 patent application fee determination record; 1 credit card payment form; 1 petition for ext. of time; 1 executed revocation of power of attorney w/new power of attorney and change of correspondence address; 1 executed statement under 37 CFR 3.73(b); 1 request for continued examination (RCE) transmittal; and 1 34-page amendment and response to 2nd office action/rec. int.	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	John R. Harris
Signature	<i>John R. Harris</i>
Date	September 29, 2003

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.	
Typed or printed name	John R. Harris
Signature	<i>John R. Harris</i>
Date	Sept. 29, 2003

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PTO/SB/17 (08-03)
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<h1 style="margin: 0;">FEE TRANSMITTAL</h1> <h2 style="margin: 0;">for FY 2003</h2> <p style="font-size: small; margin: 0;">Effective 01/01/2003. Patent fees are subject to annual revision.</p> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27</p>	Complete if Known	
	Application Number	09/476,386
	Filing Date	December 30, 1999
	First Named Inventor	German et al.
	Examiner Name	Jeffrey C. Pwu
	Art Unit	3628
TOTAL AMOUNT OF PAYMENT	(\$): 2462	
	Attorney Docket No.	4526-29734

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None
 Deposit Account

Deposit Account Number: _____
 Deposit Account Name: _____

The Director is authorized to: (check all that apply)

Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) during the pendency of this application
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	110
1252	410	2252	205	Extension for reply within second month	
1253	930	2253	465	Extension for reply within third month	
1254	1,450	2254	725	Extension for reply within fourth month	
1255	1,970	2255	985	Extension for reply within fifth month	
1401	320	2401	160	Notice of Appeal	
1402	320	2402	160	Filing a brief in support of an appeal	
1403	280	2403	140	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,300	2453	650	Petition to revive - unintentional	
1501	1,300	2501	650	Utility issue fee (or reissue)	
1502	470	2502	235	Design issue fee	
1503	630	2503	315	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt	
8021	40	8021	40	Recording each patent assignment per property (times number of properties)	
1809	750	2809	375	Filing a submission after final rejection (37 CFR 1.129(a))	
1810	750	2810	375	For each additional invention to be examined (37 CFR 1.129(b))	
1801	750	2801	375	Request for Continued Examination (RCE)	750
1802	900	1802	900	Request for expedited examination of a design application	
Other fee (specify) *please see form PTO/SB/06					1602
*Reduced by Basic Filing Fee Paid					
SUBTOTAL (3)				(\$)	2462

FEE CALCULATION

1. BASIC FILING FEE

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1001	750	2001	375	Utility filing fee	
1002	330	2002	165	Design filing fee	
1003	520	2003	260	Plant filing fee	
1004	750	2004	375	Reissue filing fee	
1005	180	2005	80	Provisional filing fee	
SUBTOTAL (1)				(\$)	

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims: _____ -20** = _____ X _____ = _____
 Independent Claims: _____ -3** = _____ X _____ = _____
 Multiple Dependent: _____ = _____

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1202	18	2202	9	Claims in excess of 20	
1201	84	2201	42	Independent claims in excess of 3	
1203	280	2203	140	Multiple dependent claim, if not paid	
1204	84	2204	42	** Reissue independent claims over original patent	
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)				(\$)	

**or number previously paid, if greater; For Reissues, see above

(Complete if applicable)

SUBMITTED BY		Registration No. (Attorney/Agent)	Telephone
Name (Print/Type)	John R. Harris	30,388	404/233.7000
Signature	<i>John R. Harris</i>	Date	Sept. 29, 2003

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